

## Attachment A.3

Mental Health Triage Personnel Grant  
Annual Fiscal ReportCounty: NevadaFiscal Year: 2013-14Date: 4/30/2015

Date: 4/30/2015

|  |                                    | Total Hours<br>Worked   | County Staff<br>FTEs | County Staff | Contract Staff<br>FTEs | Contract Staff |
|--|------------------------------------|-------------------------|----------------------|--------------|------------------------|----------------|
| A. Expenditures                            |                                    |                         |                      |              |                        |                |
| 1. Personnel Expenditures (Staff Title)    |                                    |                         |                      |              |                        |                |
| a.   | Crisis Workers                     | 702.50                  |                      | \$           | 2.0                    | \$ 22,330.00   |
| b.   | Crisis Peer Counselors - on site   | 97.00                   |                      | \$           | 0.28                   | \$ 1,455.00    |
| c.   | Crisis Peer Counselors - on call   | 241.40                  |                      | \$           | 0.70                   | \$ 2,414.00    |
| d.   | Crisis Peer Team Leaders - on site | 84.80                   |                      | \$           | 0.24                   | \$ 1,272.00    |
| e.   | Crisis Peer Team Leaders - on call | 212.60                  |                      | \$           | 0.61                   | \$ 2,126.00    |
| f.   | Administrative Staff               | -                       |                      | \$           | -                      | \$ -           |
| g.   | Respite Program Director           | -                       |                      | \$           | -                      | \$ -           |
| h.   | Respite Peer Counselors            | -                       |                      | \$           | -                      | \$ -           |
| i.   |                                    |                         |                      | \$           |                        | \$             |
|  |                                    | Total FTEs and Salaries |                      | \$           | 3.86                   | \$ 29,597.00   |
|  |                                    | Total Employee Benefits |                      | \$           |                        | \$ 3,987.66    |
| 2. Total Personnel Expenditures            |                                    |                         |                      |              |                        | \$ 33,584.66   |
| 3. Evaluation                              |                                    |                         |                      |              |                        | \$ 10,114.08   |
| 4. Direct                                  |                                    |                         |                      |              |                        | \$ 4,475.19    |
| 5. Indirect                                |                                    |                         |                      |              |                        | \$ -           |
| 6. County Administration Expenditures      |                                    |                         |                      |              |                        | \$ -           |
| 7. Subtotal (Personnel, Evaluation, Admin) |                                    |                         |                      |              |                        | \$ 48,173.93   |
| B. Received Revenues                       |                                    |                         |                      |              |                        |                |
| 1. Medi-Cal (FFP Only)                     |                                    |                         |                      |              |                        | \$ 18,969.42   |
| 2. Other Revenue                           |                                    |                         |                      |              |                        | \$ 363.62      |
| 3. Total Revenue                           |                                    |                         |                      |              |                        | \$ 19,333.04   |
| C. Grant Funding                           |                                    |                         |                      |              |                        |                |
| 1. Total Awarded                           |                                    |                         |                      |              |                        | \$ 289,260.00  |
| 2. Total Spent                             |                                    |                         |                      |              |                        | \$ 28,840.89   |
| 3. Total Unspent                           |                                    |                         |                      |              |                        | \$ 260,419.11  |
| D. Interest Earned                         |                                    |                         |                      |              |                        |                |
|  |                                    |                         |                      |              |                        | \$ -           |

X Belenza Glade  
Signature of Mental Health/Behavioral Health Director  
or Designee

4/29/2015  
Date

X  
Signature of County Auditor/Controller

Date